# Los Angeles County Sheriff's Department Officer Involved Shooting

Page 1 of 5

Report Date   Qui/01/16   Bursaus/Sulson/Facility   South Patrol Division/Lakewood Station   Admin. Invest.?   Hit?     Hit?     William   Minder										
Color   Colo	Report Date:	01/16		Bureau/Station/Facility: South Pat	rol Division/La	akewood S	tation	Admin, Inve	st,?	Hit?
City or Station.   Cakewood Station   Deputy Bryan Moreon responded to the location regarding a fight cate of the cate of th										
Last Name   Last	URN:	014-	20194-136	5-013	Date:	10/2	7/14	Time:		1437
Coalin Type   Check one or more):   Challe one or more):   Check	City or Station:		Lakewood	Station	Francis of Middle Control					
Carlot Name		ount B	oulevard, P	aramount	call. He attempted to detain Oscar Ramirez at gunpoint when a					nt when a
Canine Unit?   Canine Unit?	Check one or moi   Backyard   Beach   Business   Freeway   Industrial   Park   Parking Lot   Residence	re):	Darkne Dayligh Other Street I Weather (c	ss it lights	Accidental Armed Pers Fleeing Sus Foot Pursuit Gun Take A Moving Veh Sniper/Amb Startle Struggle Inv	on t t way side ush		Arrest Warrar Call Observation One Person t Other Search Warra Two Person t	nt Unit unit Unit	
Canine Unit?   Cani	School Street		Rain	Rain Distance:		Unarmed Penton Unimentional Vehicle Pursuit		tnmate Trans Other		
Employee # Last Name		d by Dep	uty Total # of S	hots Fired by Suspect	Warning Sh			Aero Unit?	Ca	nine Unit?
Hancock   Kenneth   L.   EM   PM   Day   Regular   Overtime   Off Duty					Employee Wi	tnesses				
Abbot Michael J. EM PM Day Regular Overtime Off Duty  Employee # Last Name First Name M.I. ShiftTime (check only one) Check only one)  Non-Employee Witnesses  Last Name First Name M.I. Street Address  City Zip Web Ab Home  Street Address  City Zip Code Web Ab Home  Street Address  Supervisors  Employee # Last Name Maese First Name M.I. (check one or more):			Han	cock	Kenneth	L.	EM PM	Day Re	gular Ove	ertime Off Duty
Non-Employee Witnesses  Last Name  First Name  City  Zip  Well  Home Ph  Last Name  Street Address  City  Zip  Well  Home Ph  Last Name  Supervisors  Employee #  Last Name  Maese  First Name  Mil.  (check and or more):  Jon Duty Present during shooting Involved in shooting Watch Sergeant  Employee #  Last Name  Watch Sergeant  Employee #  Last Name  Last Name  Mil.  (check one or more):  Jon Duty Present during shooting Involved in shooting Involved in shooting Watch Sergeant  Employee #  Last Name  Mil.  Reveles  Jose  I.  Last Name  Mil.  Last Name  Mil.  Last Name  Mil.  First Name  Mil.  Mil.  First Name  Mil.  Mil.  Mil.  First Name  Mil.  Mil.  First Name  Mil.  Mil.  First Name  Mil.  Mil.  Mil.  First Name  Mil.  M	Employee #	La		bot	Michael	J.	EM PM	☑ Day ☑ Re	gular Ove	ertime Off Duty
Street Address  City  Zip  White  How Ship  Last Name  City  Zip  White  How Ship  Last Name  Street Address  City  Zip  White  How Ship  Last Name  M.I.  Street Address  City  Supervisors  Employee # Last Name  Maese  First Name  M.I. (check one or more):  [ On Duty	Employee #	La	st Name	Firs	t Name	M,J,				
Street Address  Last Name  First Name  City  Zip  Wed Ch  Ho  Last Name  Street Address  City  Zip  City  Zip  Wed Ch  Ho  M.I.  Street Address  City  Zip  Code  Whith the street of the shooting involved in shooting inv				N.	on-Employee \					
Street Address  City  Zip  Wed Of Ho  Last Name  M.I.  Street Address  City  Supervisors  Employee # Last Name  Maese  Thomas  First Name  M.I. (check one or more):  JOn Duty Present during shooting Involved in shooting Meza  Watch Sergeant  Employee # Last Name  Watch Sergeant  Employee # Last Name  Last Name  Employee # Last Name  M.I. (check one or more):  JOn Duty Present during shooting Involved in shooting Present during shooting Involved in shooting  Watch Sergeant  Employee # Last Name  Employee # Last Name  Employee # Last Name  First Name  M.I.  Reveles  Jose  I.										M,I,
Street Address  City  Supervisors  Employee # Last Name  Maese  First Name  First Name  Supervisors  First Name  M.I. (check one or more):  On Duty Present during shooting Involved in shooting Present during shooting Involved in shooting  Watch Sergeant  Employee # Last Name  Employee # Last Name  M.I. (check one or more):  On Duty Present during shooting Involved in shooting Involved in shooting  Watch Sergeant  Employee # Last Name  Employee # Last Name  Employee # Last Name  First Name  M.I. (check one or more):  On Duty Present during shooting Involved in shooting Involved in shooting  First Name  M.I. (check one or more):  Involved in shooting Involved in shooting Involved in shooting Involved in shooting  First Name  M.I. (check one or more):  More of the check one or more):  First Name  M.I. (check one or more):  More of the check one or more or more or more or more or mo	Street Addres			City		Zip Q	W		Home	
Street Address  City  Zip Code  Wind Dit  Hame Dit  Supervisors  Employee #  Last Name  M.I. (check one or more):  Yon Duty  Present during shooting  Involved in shooting  Watch Sergeant  Employee #  Last Name  Watch Sergeant  Employee #  Last Name  First Name  Watch Sergeant  Employee #  Last Name  Last Name  First Name  Watch Sergeant  Employee #  Last Name  First Name  M.I.  Reveles  Jose  I.  MALL  Greek one or more):  Yon Duty  Present during shooting  Involved in shooting  M.I.  Reveles  Jose  I.	Last Name					First I	Name			M.I.
Supervisors  Employee # Last Name	Street All		3,0,0	City		Zip	W	- Dh	Ho	78.6
Supervisors  Employee # Last Name	Last Name					First (	Name			M.t.
Employee # Last Name First Name   M.I.   (check one or more):	Street Address			City		Zip C	ode Wes	, DL	Hame	Ph .
Maese Thomas		CHEMPT.		195	Supervis	ors		a major selection		
Meza  Jorge A  Jorge A  Jorge Witness to shooting Involved in shooting Involved in shooting Involved in shooting Involved in shooting  Watch Sergeant  Employee #  Last Name Reveles Jose I.  Watch Sergeant  First Name M.I.  Reveles  M.I.  First Name M.I.  First Name M.I.	Employee#	Last Nam		First N		M.J.	On Duty			~
Watch Sergeant  Employee # Last Name	Employee #	Last Nam		First N				nore):	☐ Witne	ss to shooting
Employee # Last Name First Name M.I.  Reveles Jose I.  Was in Grante First Name M.I.  Employee # Last Name M.I.		-775. O'C. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Meza	33 35 (2.12 - 51 - 5.1 -				ring shooting		-
Reveles Jose I.  Was the summer than the second of the sec	Employee #	[124	Name		Watch Serg		inst Name			MI
Employee # Last Name M.I.	Employee #	Las		Reveles				Jose		1.
	and was proceeded to the				Was II Genii	กงกเลย				
	Employee #	Las	Name	Lindblon	1	F	irst Name	Eric		

SH#

PSTD Use Only

2369175

#### Officer Involved Shooting

014-20194-1365-013

Day (September		and the standard of							rage		ט וו
					Rollout Informa	ation					
Arriva	10/27/14		Arrival Time	1610	Date Submitted	04/07/16	Date of	Recommendatio	n		21200 M. 4 22
Empl	oyee # Last	Varne		Ma	rtin	First I	Vame	Daniel		M.I.	W.
Empl	oyee # Last I	Varne		Uri	be	First I	Name	Jose		M.I.	G.
Empl	oyee # Last I	Vame		Flor	****	First I	Name			M.I.	G.
		ACCEPTED FOR		Succession of the Property of the Control	Sala Profesional respective and an experience of the salar	775		David	NO POST CONTRACTOR	TOWN TOWN TO	
	Andrew or			_ 5noc	ting / Force In	formation					
Meti						T	ype of Inj	urv	Body	Part In	dura
(AC) (BB) (C(C(C(TTD))) (C(EXH)) (FE) (FE) (FE)	Arwen Baton:(Control) Balon:(impact) Bodily Fluids Canine Carotid Restraint Choke Hold Control Holds:(Control 1 Control Holds:(Takedow Chemical Chemical Agents (OC 3 Chemical Agents (Tear Explosives Firearm (Handgun) Firearm (Rifle) Firearm (Shotgun) Firearm (Other) Flashbang Flashbang Flashbight Other Weapon: Edged	kedown) in) pray)	(OB) (OO) (PK) (PS) (PH) (PP) (RS) (CN) (RH) (HB) (TP) (RE) (SP) (SH) (SG) (SB) (ST) (TR)	Other Weap Personal We Personal We Personal We Personal We Resistance Restraint De Restraint De Restraint De Restraint De	on: Blunt Object on: Other eapon: Feet/Leg: (Kick eapon: Feet/Leg: (Swe eapon: Feet/Leg: (Swe eapon (Push) eapon (Push) eapon (Other) vice (Capture Net) vice (Handcuffs) vice:Hobble (Legs Onl vice:Hobble (TARP) vice: REACT Belt	(A) (B) (B) (C) (C) (D) (D) (F) (G)	B) Abrasis R) Bruise Burn P) Comple D) Concus H) Death I) Disloca B) Dog Bil Fractur B) Gunsh C) Laceral D) Nerve ( D) Organ I Paralys A) Punctur D) Sprain/	aint of Pain ssion ition ite as cot Bite tions Damage Damage is re Wound rew Damage Twists	(ACK) (ACK) (ACK) (BCK) (CH) (ELA) (FE) (GCC) (HE) (HE) (HE) (HE) (HE) (HE)	Abdom Ankle Arm Back Buttock Chest Elbow Face Faet Fingers Genitals Groin Hand Head Hip Internal Knees Leg Neck	en
Bran	d	(IV)	Iver Johnson	(RO)	Rossi	(RA	A) Refuse	d Med Treatment	(SH) (WR)	Shoulde Wrist	er.
(AK) (BN) (BR) (BW) (CH) (CO) (DA) (GL) (HA) (HI)	AK-47 Benelli Beretta Browning Charter Arms Colt Davis industries Glock Harrington & Richardson Hi Standard H & K	(JÉ) (LO) (LU) (MA) (MO) (NC) (NA) (NO)	Jennings Lorcin Luger Marlin Mossberg NCI aka SKS North Americal Narinco Raven Remington RG	(SW) (SR) (SS) (ST) (TA) (WE)	Smilh & Wesson Sturm Ruger SIG Sauer Sterling Taurus Weatherby Winchester US Government Handmade (Inmate) Homemade (Non-Inn Other Brand	(NN (9) (10) (12) (20)		(24) .243 (25) .25 cs (30) .308 (36) .357 c	aliber (4'	1) .410 4) .44 ( 5) .45 ( 0) 50 n	

#### FORCE APPLIED (one code per block)

(RG) (RI)

RG RGI

Ithica

(IT)

(ZZ)

Other Brand

.22 caliber .223 caliber

(36) (38)

(40)

.38 caliber

.40 caliber

Other caliber

Used Against (E# or S#)	Method (Code)	Brand (Code)	Caliber (Code)	Authorized Weapon? (Y/N)	Authorized Ammunition? (Y/N)	Type of Injury (Code)	Body Part (Code)
E#1	UC			1		NN	
S#1	FH	BR	9	Y	Υ		CH,BK,LE
S#1	FH	BR	9	Υ	Υ	GS,DH	HE,BT
	(E# or S#) E#1 S#1	(E# or S#) (Code)  E#1 UC  S#1 FH	(E# or S#)         (Code)         (Code)           E#1         UC           S#1         FH         BR	(E# or S#)         (Code)         (Code)         (Code)           E#1         UC         S#1         FH         BR         9	(E# or S#)         (Code)         (Code)         (Code)         Weapon? (Y/N)           E#1         UC         V           S#1         FH         BR         9         Y	(E# or S#)         (Code)         (Code)         (Code)         Weapon? (Y/N)         Ammunition? (Y/N)           E#1         UC         UC         V         Y         Y	(E# or S#)         (Code)         (Code)         Caliber (Code)         Weapon? (Y/N)         Ammunition? (Y/N)         Type of Injury (Code)           E#1         UC         NN           S#1         FH         BR         9         Y         Y         GS,DH

#### Officer Involved Shooting Involved Employee Information

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				Involve	d Empl	oyee					
E_1	Employee #	Last Name		Moreno			First Nan	Bry		M.1.	R
	Sex: M Race:	Rank: Deputy She	eriff	Unit Assignme Lakew	ood Sta	ation	Work Assig	nment (Unit #, Modul 13	e, etc.): 2E		
	ShiftTime (circle only one)  EM ✓ PM □ Day	ShiftType (circle only one) Regular Overtime	Off Durby	intoxication/Drug Usage?			Substance Used:				
	Hospital Admission?	Hospital Name:	OH Day	Coroner Case	e? 🗍		Coroner C	ase #		Interviewe	d? 🗾
	Hrs of aleep prior to shooting	g: Duty Time (hrs):	Clathing	g (circle only one).			Other Fact	tors:			•
	Age: Height:	Weight:		Clothes no Vest		cket w/ Vest					
		5'08" 175	Rard	Jackel no Vest	✓ Uniform						
	Range Qualification Date:		PPC Qu	salification Date			Li	aser Training Date:			
	Certified with Weapon Used?	Patrol Certification?	Certific	ation Unit:		Prior Shoot	tings?	Number of Prior Shootings:	Direc	ted Force:	
	Weapons Fired Brand: Be	retta Caliber 9mi	m #S	ihots 8	Weapon Brand:	s Fired		Caliber		# Shots	
	Field Training Officer Emp i	ast Name					First Nam	6		MJ,	
	Field Training Officer Emp	#ast Name					First Nam	•		M.I.	
											_
E	Employee #	Last Name					First Nan	ne		M.I.	
***************************************	Sex: Race:	Rank:	Unit Assignment				Work Assignment (Unit #, Module, etc.):				
	ShiftTime (circle only one)  EM PM Day	ShiftType (circle only one) Regular Overtime	Off Durk	Intoxication/D	rug Usage	? 🗍	Substance	Used:			
	Hospital Admission? Hospital Name:			Coroner Case?			Coroner Case #			Interviewe	d? 🖂
				Clothing (circle only one)			Other Factors				
	Age: Height:	Weight:	Plain Clothes no Vest			Laser Training Date:					
	Range Qualification Date:	-									
	Certified with Weapon Used?	Patrol Certification?				Number of Prior Dir Shootings: Caliber  First Name			cted Force:	П	
	Weapons Fired Brand:	Caliber							# Shots		
	Field Training Officer Emp I	Last Name	*						M.I.		
	Field Training Officer Emp	Last Name							M.I.		
E	Employee #					First Name			M.I.		
	Sex: Race:		Unit Assignme	int		Work Assignment (Unit #, Module, etc.):					
	ShiftTime (circle only one)	ShiftType (circle only one)		leteries Feet D			Substance	Used:		****	
	EM PM Day Regular Overtime Off			f Duty Intoxication/Drug Usage?			Coroner Case #				
	Hospital Admission? Hospital Name:			Coroner Case?						Interviewe	d?
				(circle only one) Clothes no Vest		cket w/ Vest	Other Factors:				
	Age: Height:	Weight:		Plain Clothes w/ Vest Uniform no Vest Raid Jackel no Vest Uniform w/ Vest							
	Range Qualification Date:	1 111111-011-01	PPC Qualification Date:			Laser Training Date:					
	Certified with Weapon Used?	Patrol Certification?	Certific	Certification Unit: Prior Sho			ootings? Number of Prior D			ted Force:	
	Weapons Fired Brand:	Caliber	#S	hots	Weapon Brand:	s Fired	Caliber			# Shots	
	Field Training Officer Emp #	Last Name			2.310		First Name			M.I.	
	Field Training Officer Emp #	Last Name			-		First Name	8		M.I.	

### Officer Involved Shooting Suspect Information

URN:

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	Suspect Information							
S 1	Last Name	Ramirez		First Name	Oscar M.I.	Α		
	AKA Last Name			First Name	M.J.			
	Sex: RA Race:	Street Address		64.	State & Zip Code			
	IVI Hispanic		C	City				
	Work Phone:	Home Phone:	Social Sec	cu.	Driver's Licer			
	Age: 28 D.O.B. 06/15/86	Height: 6'00" Weight: 185	FB1#		CII#			
	Booking #	Primary Charge:		Secondary Charge:				
	Coroner Case?	Coroner Case # 2014-07330		Intoxication/Drug Usage?	Substance Used: Marijuana, Methamphetamin			
	Armed?	Apprehended?		Mental (ilness?	Criminal History?			
	Vehicle Make Model	<del></del>	Paro	le: Probation:	Prior Felony Conviction:			
s	Last Name		_	First Name	M.I.	-		
	AKA Last Name			First Name	M.I.			
					*****			
	Sex: Race:	Street Address:		City	State & Zip Code			
	Work Phone:	Home Phone:	Social Sec	curity #:	Driver's License #: Cll #			
	Age: D.O.B.	Height: Weight:	FBI#					
	Booking #	Primary Charge:	4	Secondary Charge:				
	Coroner Case?	Coroner Case #		Intoxication/Drug Usage?	Substance Used:			
	Amed?	Apprehended?		Mental (Iness?	Criminal History?	-		
	Vehicle Make Model		Paro		Prior Felony Conviction:	_		
S	Last Name			First Name	M.I.			
	AKA Last Name			First Name	M.J.			
	Sex: Race:	Street Address:		City	State & Zip Code:	_		
	Work Phone:	Home Phone:	Social Sec	1000	Driver's License #:			
	Age: D.O.B.	Height: Weight:	FBI#		Cfl #			
	Booking #	Primary Charge:						
	Coroner Case?	Coroner Case #		Intoxication/Drug Usage?	Substance Used:			
	Armed?	Apprehended?		Mental Illness?	Criminal History?			
	Vehicle Make Model	Year:	Paro	le: Probation:	Prior Felony Conviction:			
s	Last Name		M.I.					
3	AKA Last Name			M.I.				
			State & Zip Code					
	Cav. Dara	Street Address		City				
	Sex: Race:	Street Address:	Social Sec	urity#	Driver's Licenses #	_		
	Work Phone:	Home Phone:	Social Sec	surity #:	Driver's License #:			
	Work Phone: Age: D.O.B,	Home Phone: Height: Weight:	Social Sec		Driver's License #:			
	Work Phone:	Home Phone:		Secondary Charge:				
	Work Phone: Age: D.O.B,	Home Phone: Height: Weight:						
	Work Phone: Age: D.O.B, Baoking #	Home Phone: Height: Weight: Primary Charge:		Secondary Charge.	CII #			
	Work Phone:  Age: D.O.B.  Baoking #  Coroner Case?	Home Phone: Height: Weight: Primary Charge: Coroner Case #		Secondary Charge:  Intoxication/Drug Usage?  Mental Illness?	CII # Substance Used:			

## SUPPLEMENTAL NON-EMPLOYEE WITNESSES Los Angeles County Sheriff's Department

Non-Employee Witnesses M.I. Last Name First Name Zip Code Work Ph Street Address Home Ph Last Name First Name M.I. Zip Code Home Ph Street Address M.L Last Name First Name Street Address Zip Code Work Ph Home P M.I. Last Name First Name Zip Code Home Ph Street Address Work Ph M.I. Last Name First Name Zip Code Home Ph Street Address Work Ph M.I. Last Name First Name Street Address Zip Code Work Ph Home Ph Last Name First Name M.I. Street Address Zip Code Work Ph Home Ph M.I. Last Name First Name Street Address Zip Code Home Ph Work Ph First Name M.I. Last Name Home Ph Street Address Zip Code Wark Ph Last Name First Name M.I. Street Address Home Ph Zip Code Work Ph M.L Last Name First Name Street Address Zip Code Work Ph Home Ph M.I. Last Name First Name Street Address Zip Code Home Ph Work Ph M.L. Last Name First Name Street Address Zip Code Work Ph Home Ph Last Name First Name M.L Street Address Zip Code Home Ph Work Ph Last Name First Name M.I. Street Address Zip Code Work Ph Home Ph M.I. Last Name First Name Street Address Zip Code Work Ph Home Ph